

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number		10/587,428-Conf. #8156	
	Filing Date		January 31, 2005	
	First Named Inventor		Johan Engström	
	Title		FLOW PATHS COMPRISING ONE OR TWO POROUS BEDS	
	Art Unit		N/A	
	Examiner Name		Not Yet Assigned	
		Attorney Docket No.		60889/HO-P02936US1/10608643

I hereby revoke all previous powers of attorney given in the above-identified application.

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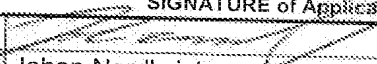
I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	1/31/05
Name	Johan Nordkvist	Telephone	+46 18526 700
Title and Company	Authorized Signer of Gyros Patent AB		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.